



City of Moorpark

Application Submittal Requirements

For Film Permit

The following list, as identified by City Staff, specifies information that is required in order to submit a film permit application. For more information, please call (805) 517-6224.

Submittal Requirements by: _____ Date: _____ Application Reviewed by: _____ Date: _____

Community Development Department Film Permit Requirements		Submitted
1.	Film Permit Application <input type="checkbox"/> Application <input type="checkbox"/> Insurance Requirements <input type="checkbox"/> Indemnification Agreement	<input type="checkbox"/>
2.	Fee (established by Resolution No. 96-1214)	<input type="checkbox"/>
3.	Insurance Naming the " <i>City of Moorpark and its officers, employees, servants, and agents</i> " in the following: <input type="checkbox"/> Certificate of Insurance <input type="checkbox"/> Endorsement <input type="checkbox"/> Worker Compensation (if applicable)	<input type="checkbox"/>
4.	"Permission to Use Property" Letter or Contract Lease Agreement	<input type="checkbox"/>
5.	Site Plan showing the following: <input type="checkbox"/> Filming location <input type="checkbox"/> Base camp (if applicable) <input type="checkbox"/> Crew parking (if applicable)	<input type="checkbox"/>

**Submitting an incomplete application with missing information may result in delays or the denial of processing your permit.*



City of Moorpark Film Permit Application

(Application must be submitted at least two (2) weeks in advance prior filming activity)

Film Permit #: _____

Date Submitted: _____

Production Information

Company Name: _____

Address: _____

*Contact Person # 1 Name: _____ Title: _____

Phone: _____ Fax: _____

Cell Phone or Pager #: _____ Email: _____

*Contact Person # 2 Name: _____ Title: _____

Phone: _____ Fax: _____

Cell Phone or Pager #: _____ Email: _____

**Please note: At least one contact person must be on site and available to City staff during the filming period.*

Type of film:

- | | | | | |
|----------------------------------|-------------------------------------|--------------------------------------|--------------------------------|---------------------------------------|
| <input type="checkbox"/> Feature | <input type="checkbox"/> Commercial | <input type="checkbox"/> Photo | <input type="checkbox"/> Pilot | <input type="checkbox"/> Student |
| <input type="checkbox"/> Indie | <input type="checkbox"/> Webisode | <input type="checkbox"/> Music Video | <input type="checkbox"/> TV | <input type="checkbox"/> Other: _____ |

Location Information

Production Title: _____

Filming Date(s)	Filming Time(s)	Location(s)

Prep Date(s): _____ Strike Date(s): _____

Base Camp Location: _____

Description of Scene: _____

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Street Closure | <input type="checkbox"/> Animals | <input type="checkbox"/> Traffic Control | <input type="checkbox"/> Catering Truck |
| <input type="checkbox"/> Sidewalk Closure | <input type="checkbox"/> Encroachment Permit | <input type="checkbox"/> Open Flame | <input type="checkbox"/> Pyrotechnics |
| <input type="checkbox"/> Wet down | <input type="checkbox"/> Catering Truck | <input type="checkbox"/> Generators | <input type="checkbox"/> Pedestrian Control |
| <input type="checkbox"/> Drones | | | |

If YES on any of the above questions, please explain _____

Number of Vehicles/Equipment: Cars _____ Vans _____ Trucks _____ Camera Cars _____

Motor Homes / Trailers _____ other (specify) _____

Number of Personnel: Cast _____ Crew _____ Extras _____ Total _____

Print Name

Signature

Date



City of Moorpark FILM PERMIT INSURANCE REQUIREMENTS

_____, the Applicant, agrees to obtain and keep in full force and effect the following insurance coverage (listed below) for the period of the subject event. Further, applicant agrees to provide the City of Moorpark and its officers, employees, servants, and agents with a Certificate of Insurance verifying the City of Moorpark has been added to the policy as an *additional named insured* for the coverage outlined below without deductible. The Certificate of Insurance shall provide for a thirty (30) day notice for the insurance carrier to the City of Moorpark in the event the insurance is to be canceled.

Minimum insurance requirements for the City of Moorpark Film Permits are as follows:

- A. General (Public) Liability not less than the following amounts:
 - \$1,000,000 bodily injury, including wrongful death - each person;
 - \$1,000,000 bodily injury – aggregate;
 - \$1,000,000 property damage – each occurrence;
 - \$1,000,000 property damage – aggregate
- B. Auto (Comprehensive) Liability not less than the following amounts:
 - \$1,000,000 bodily injury, including wrongful death - each person;
 - \$1,000,000 bodily injury – aggregate;
 - \$1,000,000 property damage – each occurrence;
 - \$1,000,000 property damage – aggregate
- C. Workers Compensation Insurance as required by law.

Insurance coverage in the minimum amounts set forth herein shall not be construed to relieve Applicant of liability in excess of such coverage, nor shall it preclude City from taking such actions against Applicant as are available to it under any other provisions of this Agreement or otherwise in law or at equity.

Applicant shall maintain the insurance required by this paragraph until all of the work required by permit has been released in accordance with the provisions of that paragraph. All insurance policies required herein shall be written on an occurrence basis.

Applicant Signature

Printed Name

Date



City of Moorpark

FILM PERMIT INDEMNIFICATION AGREEMENT



_____, the Applicant, hereby agrees to indemnify, defend and hold harmless the City of Moorpark and its officers, employees, servants and agents from any claim, demand, damage, liability, loss, cost or expense, for any damage whatsoever, including but not limited to death or injury to any person or injury to any property, proximately resulting from any act or omission of _____, the Applicant, or any of its officers, employees, servants, agents, or participants in the proposed filming event to occur on the date(s) and location(s) listed below and at any properties that are publicly owned, including sidewalks, and the general proximity thereof.

Date(s)

	/		/
	/		/
	/		/
	/		/

Location(s)

Applicant Signature

Date



QUESTIONNAIRE FOR FILMING

Contact: Lori Ross, Filming Fire Safety Coordinator
Tel: (805) 947-8535 Fax: (805) 383-4766

NAME OF PRODUCTION AND PRODUCTION COMPANY:

LOCATION OF FILMING: _____

DATE/S OF FILMING: _____

Fire Department Review Fee for Any Filming Activity:	\$216.00
Review Fee for Still Photography:	\$144.00
Review for Student Film:	\$216.00

If any of the following will be present at the production site or base camp area a Fire Code Permit and a Fire Safety Officer may be required.

Tents/canopy 401-1600 sq. ft.	___ No	___ Yes	\$216.00
Tents/canopies great than 1600 sq.ft	___ No	___ Yes	\$360.00
Pyrotechnics (explosives, squibs, open flame)	___ No	___ Yes	\$252.00
Refueling unit	___ No	___ Yes	\$144.00
Hot work, welding, and cutting operations	___ No	___ Yes	\$324.00
Construction of structures	___ No	___ Yes	
Operation or landing of aircraft or helicopters	___ No	___ Yes	
Stunts	___ No	___ Yes	

The Fire Safety Officer is on a time card and paid by the production company. The current rate is \$48.00 per hour with an 8-hour minimum, with time-and-a-half after 8 hours and double time after 12 hours.

COMPANY REPRESENTATIVE: _____

Contact number: _____